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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE			
REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FORM (37 C.F.R. § 1.114)			
DOCKET NO. 10191/4460	APPLICATION SERIAL NO. 10/552,402	EXAMINER Imran K. MUSTAFA	ART UNIT 4182
FILING DATE July 12, 2006		CONFIRMATION NO.	
<p style="font-size: small;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:</p> <p>Applicant(s): Michael WEILKES et al</p> <p>Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Mail Stop <u>RCE</u> Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on Date: <u>2/17/2009</u> Signature: <u>[Signature]</u> ARON C. DEBICHE</p> <p>This is a Request for Continued Examination under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 10/552,402, filed on July 12, 2006, (93855) METHOD AND DEVICE FOR CONTROLLING A DRIVER-ASSISTANCE DEVICE.</p> <p>The following constitute the submission required by 37 C.F.R. § 1.114(a) and is attached: <u> X </u> Please enter the accompanying RCE-Amendment After a Final Office Action (further responsive to the Final Office Action mailed on August 25, 2008, and in lieu of an Appeal Brief due February 17, 2009 (since February 15, 2009 was a Sunday and since February 16, 2009 was a federal holiday) (a Notice of Appeal was electronically filed on December 15, 2008, so that the two month response date is February 17, 2009). <u> </u> Information Disclosure Statement and Form PTO-1449 <u> </u> Drawing Changes <u> </u> Other Submission: _____</p>			

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$)* PER CLAIM	FEE (\$)
BASIC FEE						810.00
TOTAL CLAIMS	20	-	20	0	52.00	0.00
INDEPENDENT CLAIMS	2	-	3	0	220.00	0.00
MULTIPLE DEPENDENT CLAIM					390.00	
				*Number extra must be zero or larger	TOTAL	810.00
If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.						SMALL ENTITY TOTAL

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RCE Amendment After A Final Office Action

2. Please charge the required RCE and submission filing fee of \$810.00 to the deposit account of Kenyon & Kenyon LLP, Deposit Account No. 11-0600.
3. The Commissioner is hereby authorized to charge payment of the fees, including any additional and/or extension fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of Kenyon & Kenyon LLP, deposit account number 11-0600.

Respectfully submitted,

Dated: 2/17/2008


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